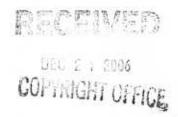
Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Sirvini LLC
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Exclusivetherapist.com
Address of Service Provider: 83 Winston Rd., Newton, MA 02459
Name of Agent Designated to Receive Notification of Claimed Infringement: Srinivasan Pillay
Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location): 83 Winston Rd., Newton, MA 02459
Telephone Number of Designated Agent: 617-794-1509
Facsimile Number of Designated Agent:
Email Address of Designated Agent: ssp@exclusivetherapsit.com
Signature of Officer or Representative of the Designating Service Provider: Date: 11/20/06
Typed or Printed Name and Title: Srinivasan S. Pillay Manager

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

SCANNED 0 1 12-2007





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